

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Nancy E. Barton, et al. : Art Unit: 3629
Serial No.: 09/848,051 : Examiner: Ruhl, Dennis William
Filed: May 3, 2001 :
For: METHODS AND SYSTEMS :
FOR COMPLIANCE PROGRAM
ASSESSMENT

Mail Stop: RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:
Extension of Time Transmittal (3 pages)

STATUS

2. Applicant claims small entity status.
 is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

(a) Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

| Extension for response within: | Other than small entity Fee | Small entity Fee (if applicable) |
|---|-----------------------------|----------------------------------|
| <input type="checkbox"/> first month | \$ 120.00 | \$ 60.00 |
| <input type="checkbox"/> second month | \$ 460.00 | \$ 230.00 |
| <input checked="" type="checkbox"/> third month | \$ 1,050.00 | \$ 525.00 |
| <input type="checkbox"/> fourth month | \$ 1,640.00 | \$ 820.00 |
| <input type="checkbox"/> fifth month | \$ 2,230.00 | \$1,115.00 |
| | Fee Due | <u>\$ 450.00</u> |

If an additional extension of time is required, please consider this a petition therefor.
(Check and complete the next item, if applicable)

An extension of 2 months has already been secured. The fee paid therefor \$450.00 is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ 600.00.

OR

(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

| | (Col. 1) | | (Col. 2) | (Col. 3) | SMALL ENTITY | | OTHER THAN SMALL ENTITY |
|---|---|-------|---------------------------------------|----------------------------|--------------------------|--------------------------------|----------------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDITIONAL.. RATE FEE | OR | ADDITIONAL RATE FEE |
| TOTAL INDEP | | MINUS | | = | x \$9 = \$ | | x \$18 = \$0.00 |
| | | MINUS | | = | x \$44 = \$ | | x \$88 = \$0.00 |
| — FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | + \$150 = \$ | | | + \$300 = \$ |
| | | | | TOTAL ADDITIONAL FEE \$ | OR | TOTAL ADDITIONAL FEE \$0.00 | |

(a) No additional fee for Claims is required

OR

(b) Total additional fee for claims required \$

FEE PAYMENT

5. Attached is a check in the sum of \$_____

Charge Deposit Account No. 01-2384 the sum of \$600.00
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. Other:



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